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Bib Data Sheet

CONFIRMATION NO. 3668

SERIAL NUMBER 10/693,853	FILING DATE 10/23/2003	CLASS 188	GROUP ART UNIT 3883	ATTORNEY DOCKET NO. LEW 17,510-1
RULE				

APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 01/22/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Mpt after Allowance XLN 6/10/04 Examiner's Signature Initials	STATE OR COUNTRY OH	SHEETS DRAWING 10	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 4
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ADDRESS

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TITLE

Torsional magnetorheological device

FILING FEE RECEIVED 856	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input checked="" type="checkbox"/> All Fees <input checked="" type="checkbox"/> 1.16 Fees (Filing) <input checked="" type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input checked="" type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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